File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Sts. 1A Des Molnes, Iowa 50319 Env. 645-281-4073



FOR INSTRUCTIONS, SEE BACK OF FORM

IA ETHICS AND

Pax: 515-281-4073 DISCLOSURE SUMMARY PAGE	PATEN MISSELD JURE DU.
COMMITTEE NAME (Must be same as on Statement of Organization)	19 JUL 18 AM 8: 24
IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Bellet Issue	FORM DR-2 (Rev. 07/2007) DISCLOSURE REPORT For Office Use Only
Candidate Name Candidate Name Dave Office Sought Down Co. Sheriff Candidate Name Political Party (if applicable) Democrat District (if Senate or House)	Comm, # Logged In Scanned Computer Audited
Late reports are subject to possible civil and criminal penalties. Pursuant to lowa Code sections 68B.32A(7) SIGNATURE OF PERSON FILING REPORT TELEPHONE	and 68A.401(3), the candidate, for a 7-/7-08 DATE SIGNED
I AM FILING A	NON-ELECTION YEAR.
CHECK IF AMENDMENT TO REPORT DATED	cal Committees, enter Date of Election
(You must continue to file reports until a DR-3 is filed.) Co wh wh STATEMENT OF CASH ON HAND	unty & Local Committees, enter County in ich Election is held
CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)	s <u>1.1000.03</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	35 22
Schedule F: Loans Received total (Attach Schedule F)	
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	<u> </u>
(Schedule H applies to Candidates' Committees Only) SUB-TOTAL	1,635 03
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	906 10
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	
Schedule F: Loan Repayments total (Attach Schedule F)	
CASH ON HAND at the end of this reporting period (if final report balance must be zero)	\$ <u>739.93</u>
*UNPAID BILLS (From Schedule D - Attach Schedule D)	\$
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	
*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	s 2,000 <u>so</u>
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES _XNO
CANDIDATE COMMITTEES ONLY: VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	, 0
STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each ye	ear.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

(Rev. 07/03) MONETARY RECEIPTS

CHECK THIS BOX IF AMENDING FORM

SCHEDULE

COMMITT	EE NAME	Must be s	same as o	n Statement o	f Organization)		
	11				•		
1/ commi	1 t 00	715	1000				

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MIWDD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	TOC (if a	ATIONSHIP AMOUNT ANDIDATE* RECEIVED pplicable)	V IF FOR FUND- RAISER INCOME
5-15-08	ID# CK#	Deposit from Fund Kaller Dinner	19 \$35 <u>00</u>	V
	ID# CK#			
		SUB-	schedule) \$35.00	

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page of (for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

ACCOUNT.

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization) Elect Dave David CANDIDATE NAME AND ADDRESS TO WHOM AMOUNT DATE ID NUMBER EXPENDITURE (DESCRIBE TRANSACTION) **EXPENDED** EXPENDED (If applicable) AND PAC (Disbursement) WAS MADE (MM/DD/YR) CHECK NUMBER ID# Tri-County Shopper 5/23 Election Ad CK#1016 \$ 3955 BLFD ID# Youar Lumber 5123 4927 Plywood for Signs CK#1017 ID# 5/28 Bloomfield Democrat Election Ad 173 80 CK#10)8 3-weeks ID# 5128 True VAIUE HArdware PAINT for Election Signs 20 CK#1019 RIFD ID# 5/28 Yuper Lumber Lumber + Paint CK# 1020 ID# Bloomfield Democrat 5130 Ad for Newspaper 20 CK#1021

SUB-TOTAL \$ Q7439,60
TOTAL (If last page of this schedule) \$

Zidna

for Sign Trips

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

ID#

ID#

CK# 1022

CK# 1023

430

5131

BIR

Tractor

BIFD.

Abcattes

Ice

Supply

Wass e

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expenditures to persons/entitles providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and Iowa Code 68A 402(3)(i).)

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Page	of	<u> </u>

(for Schedule B)

59

FOR INSTRUCTIONS, SEE BACK OF FORM

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SCHEDULE (Rev. 07/03)

MONETARY EXPENDITURES

CHECK THIS BOX IF AMENDING FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization) ionmillee 76 Dave Eleca CANDIDATE NAME AND ADDRESS TO WHOM EXPENDITURE AMOUNT DATE ID NUMBER (DESCRIBE TRANSACTION) EXPENDED EXPENDED (if applicable) (Disbursement) WAS MADE (MM/DD/YR) AND PAC CHECK NUMBER ID# Tri- Comy Shopper Thank-You Ad s 2700 6/2 CK# 1024 BIF ID# Broken Arrow Wenr Election Shirts a 346 97 614 CK# 1025 Hars Des Moines ID# GAS TO PICK-UP Ice House CK# 1026 Election Signs ID# payment on Election NAT Order Broken Arrow Wear ماالما 62 37 CK# 1027 Des Moines, la ID# CK# ID# CK# ID# CK# ID# CK# SUB-TOTAL

TOTAL (If last page of this schedule)

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entitles providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

> 6 Page

> > (for Schedule B)

		on Statement of Organization) 7 Daue Daury for	Shende		LO. REC
: This sched	lule reports money loa	ned to the committee which is deposited in REPORTING PERIOD \$ 2000	the committee account.	CHECK THI AMENDING	
i - MONETA (Original	ARY LOANS RECEIV source of loan, such a	ED <u>THIS</u> REPORTING PERIOD as a bank, must be shown if a third party is	involved. Include loans from candid	iate's personal fund	s.)
DATE RECEIVED MM/DD/YR)	NAN (includ	AE AND ADDRESS OF LENDER de Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*	AMOUNT OF L	OA!
	NO New	loan has been ta		\$	
			Aug.		
					
	garage and the second		the state of the s		
'II - MONET. (Loans fo	ARY LOAN REPAYN Digiven must be repor	IENTS MADE <u>THIS</u> REPORTING PERIOD ted on Schedule E In-kind Contributions.	TOTAL (PART I)		
(Loans to	Orgiven must be repor	IENTS MADE <u>THIS</u> REPORTING PERIOD ted on Schedule E In-kind Contributions, AND ADDRESS OF LENDER Endorser's Name, If Applicable)		AMOUNT REP	AID
(Loans to	NAME (Include	EAND ADDRESS OF LENDER Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)		AID
(Loans to	NAME	ted on Schedule E In-kind Contributions, AND ADDRESS OF LENDER Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE* (if Applicable)		AID
(Loans to	NAME (Include	AND ADDRESS OF LENDER Endorser's Name, if Applicable) Taken out from	RELATIONSHIP TO CANDIDATE* (If Applicable)		AID
(Loans to	NAME (Include	AND ADDRESS OF LENDER Endorser's Name, if Applicable) Taken out from	RELATIONSHIP TO CANDIDATE* (If Applicable)		AID
ATE PAID M/DD/YR)	Mis Payme That wan reporting	AND ADDRESS OF LENDER Endorser's Name, if Applicable) Taken out from per 150.	RELATIONSHIP TO CANDIDATE* (If Applicable) LAST REPAYMENTS (PART II) AL LOANS FORGIVEN ND OF REPORT PERIOD		AID .